## IL DEPT OF TRANSPORTATION DIVISION OF TRAFFIC SAFETY ACCUMULATED TOTALS

# **City Summary**

Selection Criteria: 1/1/2007 thru 12/31/2007

NUMBER OF CRASHES

INJURY SEVERITY

	NUMBER OF CRASHES INSURT SEVERI								PLVLINIII	1	
				PROPERTY	TOTAL	TOTAL	TOTAL				
Mill Shoals	TOTAL	FATAL	INJURY	DAMAGE	VEHICLES	KILLED	INJURED	Α	В	С	0
WEATHER CONDITION											
Clear	2	0	0	2	3	0	0	0	0	0	4
TOTALS		0					0				4
TYPE OF CRASH	_	•	•	_	•	· ·	•	•	•	•	•
Animal	1	0	0	1	1	0	0	0	0	0	2
Turning	1	0	0	1	2	0	0	0	0	0	2
TOTALS		0					0				4
CLASS OF CITY	_	•	Ţ	_	•	· ·	•	•	•	•	
0 TO 2,500	2	0	0	2	3	0	0	0	0	0	4
TOTALS		0					0				4
ROAD SURFACE CONDITION	_		ŭ	-	J	·	Ū	ŭ	· ·	· ·	
Dry	2	0	0	2	3	0	0	0	0	0	4
TOTALS											
	2	0	0	2	3	0	0	0	0	0	4
CLASS OF TRAFFICWAY State Numbered Rural	2	0	0	2	3	0	0	0	0	0	4
TOTALS											
TOTALS	2	0	0	2	3	0	0	0	0	0	4
DAY OF WEEK											
Tuesday	1	0	0	1	2	0	0	0	0	0	2
Wednesday	1	0	0	1	1	0	0	0	0	0	2
TOTALS	2	0	0	2	3	0	0	0	0	0	4
TIME OF DAY											
9 AM	1	0	0	1	1	0	0	0	0	0	2
3 PM	1	0	0	1	2	0	0	0	0	0	2
TOTALS	2	0	0	2			0		<u> </u>		4
LIGHT CONDITION											
Daylight	2	0	0	2	3	0	0	0	0	0	4
TOTALS		0					0				4
ROAD DEFECTS											
No Defects	2	0	0	2	3	0	0	0	0	0	4
TOTALS		0					0				4
TRAFFIC CONTROL	_	·	Ū	_	J	U	Ū	· ·	U	U	7
No Controls	2	0	0	2	3	0	0	0	0	0	4
TOTALS											
	2	0	0	2	3	0	0	0	0	0	4
ROADWAY FEATURE	2	0	0	2	2	0	0	0	0	0	4
Not Applicable TOTALS				2	3	0	0	0	0	0	4
IUIALO	2	0	0	2	3	0	0	0	0	0	4

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NUMBER OF CRASHES INJURY SEVERITY

Mill Shoals	TOTAL	FATAL	INJURY	PROPERTY DAMAGE	TOTAL VEHICLES	TOTAL KILLED	TOTAL INJURED	A	В	С	0
VEHICLE DEFECTS											
No Defect	2	0	0	2	2	0	0	0	0	0	2
Unknown	1	0	0	1	1	0	0	0	0	0	2
TOTALS	3	0	0	3	3	0	0		<u> </u>	0 -	4
VEHICLE TYPE											
Passenger	2	0	0	2	2	0	0	0	0	0	3
Pickup	1	0	0	1	1	0	0	0	0	0	1
TOTALS	3	0	0	3			0	0			4

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NUMBER OF CRASHES

INJURY SEVERITY

					PROPERTY	TOTAL	TOTAL	TOTAL				
Mill Shoals		TOTAL	FATAL	INJURY	DAMAGE	VEHICLES	KILLED	INJURED	Α	В	С	0
DRIVER CONDITION												
Normal		3	0	0	3	3	0	0	0	0	0	3
TOTALS			0			3		0				3
DRIVER AGE/GENDER												
35-39	Male	1	0	0	1	1	0	0	0	0	0	1
45-49	Male	1	0	0	1	1	0	0	0	0	0	1
60-64	Female	1	0	0	1	1	0	0	0	0	0	1
TOTALS			0	0		3	0	0		<u> </u>	0 -	3
PASSENGER AGE/GENDER												
90-94	Female	1	0	0	1	1	0	0	0	0	0	1
TOTALS		1	0	0		1 -	0	0		<u> </u>	0 -	1